File with: lowe Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

FOR INSTRUCTIONS, SEE BACK OF FORM DISCLOSURE SUMMARY PAGE

CAMPAIA ETHICS AND
CAMPAIA ETHICS AND
2009 JAN 20 AM 11: 09

DISCLOSURE	SUMMART PAGE		- -	
COMMITTEE NAME (Must be same as on Statement of Orga	nization)			
VOICES TO ELECT NATHON BI		FORM DR-2 (Rev. 07/2007) For Office Use Only Comm. #		
IMPORTANT: Indicate by # type of committee you are reporting for: (1) Statewide/Legislative/Judge Standing for Retention Candidate (4) County Central Committee (5) County Candidate (6) City Candi Subdivision Candidate (8) County PAC (9) City PAC (10) School (11) Local Ballot leave	(Rev.			
CANDIDATE COMMITTEES ONLY: Candidate Name レタイリタン だれのいい	Political Party (if applicable)	Logge Scarr Comp	ned	
Office Sought PAULUPORT ALDERAN	District (if Senate or House)	Audite		
Late reports are subject to possible civil and criminal penalties. Properties committee, and the chairperson, for any other type of Charles Ch	ursuant to lows Code sections 688.32 committee, is the individual responsib 503-384-2672 TELEPHONE	A(7) and 68A.4 te for filing time	101(3), the candidate, for a selv and accurate reports. 19 0 9 DATE SIGNED	
AM FILING A	REPORT FOR (1) ELECTION	/(2)NON-FLE	CTION YEAR	
(report date) Indicate by # [Local Committee	ees, enter Date of Election	
Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a DR-3 is filed.)		County & Loca which Election	## ## ## ### ### #####################	
STATEMENT OF CASH ON HAN	D			
CASH ON HAND at the beginning of the reporting period. (To committee. This amount MUST be the same as the of the last reporting period or must be zero if this is fi	cash on hand at the end	., .	8320z	
ADD TOTAL MONEY TAKEN IN THIS PERIOD				
Schedule A: Cash Contributions total (Attach Sched	ule A) ("also see in-kind below)		100.00	
Schedule F: Loans Received total (Attach Schedule	F)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	760.00	
Schedule H: Total Sales of Campaign Property (Atta	ich Schedule H)			
(Schedule Happlies to Candidates' Com	mittees Only)			
	SUB-TOTAL.	\$	1,692,02	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	3		, , , , , , , , , , , , , , , , , , ,	
Schedule B: Expenditures total (Attach Schedule B)	(**also see debts and loans below)		1,464.03	
Schedule F: Loan Repayments total (Attach Schedu	le F)		215,00	
CASH ON HAND at the end of this reporting period (if final rep	cort balance must be zero)	\$	12.99	
"UNPAID BILLS (From Schedule D - Attach Schedule D)		\$		
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Sche	dule E)	\$		
**OUTSTANDING LOANS (From Schedule F - Attach Schedu	<i>i</i> e F)	\$	1,645.00	
CONSULTANT BREAKDOWN (Schedule G Attached?)			YESNO	
CANDIDATE COMMITTEES ONLY:				
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Atty	ach Schedule H)	\$		
STATE COMMITTEES: Submit a reconciled campaign accou	int bank statement in January of ear	h year,		

COMMITTEE NAME (Must be same as on Statement of Organization)

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE В MONETARY **EXPENDITURES** (Rev. 07/03)

CHECK THIS BOX IF

AMENDING FORM

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAG COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

To ELLET MATHON BROWD NAME AND ADDRESS TO WHOM **PURPOSE** AMOUNT (DESCRIBE TRANSACTION) DATE ID NUMBER EXPENDITURE EXPENDED EXPENDED (if applicable) (Disbursement) WAS MADE (MM/DD/YR) AND PAC CHECK NUMBER ID# WEST END GARDENS 10/29/01 CK# 1017 FLOWERS. THANK YOUS \$ 80.75 ID# PRENSEW PRAMING W 30 lo 311 2157 ST CK# 1018 ROCK ISLAND DE LITOI 177.00 ID# QUATI CATY PSIRES MAR. MASISNE COSTS 5333 AVENUE OF THELSOES MOGENE, IL GITTES ומא סביו עו CK# /0/9 443.94 ID# Post Office 920 W ZUD POSTAGE CK# TAU IA 57862 2.08.00 ID# WELLS FARGO BANK BANK SCY 646 WALDUT ST CK# 8.41 DRS MOINES, IA 50309 ID# QUAD CETA PEREET MAJE MARICLAN Com 5333 AVENUE OF THE GIVES CK# 60 70 MOUNT, IL GRES 443.94 ID# ELETTER AN AMERICAN OKTOBERLEST 11/8/01 AĐ CK# 1071 25.00 MAURNPORT, IA STROY ID# WELLS FARGO BANK tehlor BANK SC'S 644 WALNUTST CK# 7.49 THE MOLNES IA 50309 SUB-TOTAL

TOTAL (if last page of this schedule)

394.03

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchazes of cartain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Exponditures to persons/entities providing consulting, adventising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedulo G instructions and lows Code 68A.402(3)(i).)

Page

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE В MONETARY (Rev. 07/03) **EXPENDITURES**

> CHECK THIS BOX IF AMENDING FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization) ELECT NATHAN NAME AND ADDRESS TO WHOM CANDIDATE PURPOSE AMOUNT DATE ID NUMBER EXPENDITURE (DESCRIBE TRANSACTION) EXPENDED EXPENDED (if applicable) (Disbursement) WAS MADE (MM/DD/YR) AND PAC CHECK NUMBER 12/4/07 ID# SCOTT COUNTY DENOCRATE TICKETS TO DENNERS P.O. Box 2009 CK# 1022 \$ 70.00 DAU 52.809 ID# CK# SUB-TOTAL

TOTAL (if last page of this schedule)

464.03

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H Instructions.)

Expanditures to persons/entitles providing consulting, advertising, fund-raising, politing, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/ontity on behalf of the candidate's committee. (Refer to Schedule G instructions and lows Code 68A.402(3)(i).)

2

R INSTRUCTIONS, SI	EE BACK OE EODM		
MMITTEE NAME(MU	st bc same as on Statement of Organization)	Data Adaption of Attack Local	F LOANS Rev. 02/08) RECEIVE & REPAIL
re; This schedule re	PORTS MANUAL BRICKS PORTS MONEY loaned to the committee which is deposited in FROM LAST REPORTING PERIOD \$	the committee account.	CHECK THIS BOX AMENDING FORM
	OANS RECEIVED <u>THIS REPORTING PERIOD</u> e of loan, such as a bank, must be shown if a third party is		e's personal funds.)
DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RÉLATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
10/29/07	MANN BROWN 915 CAMMARROW PAVENPORT, IN 52504	CANDID ME	500-00
11/107	u u	ď	500.00 190.00
ग्यीपीन	a g	۲/	70.00
		·	
'ART II - MONETAR (Loans forgi	Y LOAN REPAYMENTS MADE <u>THIS</u> REPORTING PERIO Ven must be reported on Schedule E — In-kind Contribution	TOTAL (PART I) DD ns.)	s 740.00
DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
11/	PATHAN BROWN		\$

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
11/19/07	NATHAN BROWN 915 GAMMARON PANENPORT, J.A. 52804	CANDIDAR	200.00
10/20/07	4 4 .	4	15.00

TOTAL CASH REPAYMEN	•	\$ 215.00
TOTAL OUTSTANDING LOANS END OF REP		\$ 1,045,00
*Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consonguinity (blood relatives) and affinity (relatives by marriage). If summane of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column when it applies.	Page	of(for Schedule F)